•	PARENI	HU	'	00	1841	67							
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAT TYPE CON SMALL ENTITY					
TOTAL CLAIMS			33					RATE	ĒŢ	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	FEE	355.00	OR	BASIC FEE	710.00
το	TAL CHARGEA	33 minus 20=		13			X\$ 9=			OR	X\$18=	234.00	
IND	EPENDENT C	5 minus 3 = 1		2			X40=			OR	X80=	160.00	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=			ОЯ	+270=	180.00
• If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	"0" in column 2		TOTAL			OR		11740
CLAIMS AS AMENDED - PART II									- נ	-	On	OTHER	
(Column 1) (Column						(Column 3)		SMAL	ΤĒ	NTITY	OR	SMALL	
AMENDMENT A	12/22/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 33	Minus	3	3	- Ø,		X\$ 9-	-	1	OR	X\$18=	
AME	Independent	· 5	Minus ••• ¿		5	= (//		X40=		1	OR	X80≂	/
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	_		OR	+270=	
	./ .							TOT		-4-	OR	TOTAL ADDIT, FEE	-0-
<u>4</u>	28/00	(Column 1)		_{Colu	mn 2)	(Column 3)		NOOH, P	EE L			ADDII. PEEI	
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 33	Minus	33		=	ll	X\$ 9=	-	/	OR	X\$18=	1
	Independent	NTATION OF MI	Minus	S		= /	$\ \ $	X40=			OR	X80=	
,		SVIANION OF IM	JENIPEC DEI	LIVEN	CCAIM		' [+135=	_1		OR	+270=	
										l	OR	ADDIT FEE	
-		(Column 1)		(Colur High		(Column 3)	1						•
AMENDMENT C		REMAINING AFTER AMENDMENT	•	NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON:	Total	•	Minus	••		=		X\$ 9=	,		OR	X\$18=	
AME	Independent	•	Minus	***		2		X40=	7			X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." ADDIT. FEE												TOTAL ADDIT, FEE	
1	The "Highest Num	iber Previously Pai	d For (Total or	Independ	ent) is the	highest numbe	er fou	nd in the	appn	opriate box	in col	umn 1.	

Application or Docket Number